

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 5	
1. CONTRACT PURCH ORDER/AGREEMENT NO. W56HZV-05-D-0174			2. DELIVERY ORDER/CALL NO. 0019		3. DATE OF ORDER/CALL (YYYYMMDD) 2007MAR06		4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE		5. PRIORITY DOA4		
6. ISSUED BY U.S. ARMY TACOM LCMC AMSTA-AQ-ADEC ELAINE NELSON (586)574-8284 WARREN, MICHIGAN 48397-5000 EMAIL: NELSONE@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL			CODE W56HZV		7. ADMINISTERED BY (If other than 6) DCMA TEXAS 600 N PEARL STREET SUITE 1630 DALLAS, TX 75201-2843  SCD: B PAS: NONE ADP PT: HQ0339			CODE S4402A		8. DELIVERY FOB  <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)	
9. CONTRACTOR  KALMAR RT CENTER LLC 103 GUADALUPE DRIVE SAN ANTONIO, TX 78108-1028  NAME AND ADDRESS  TYPE BUSINESS: Large Business Performing in U.S.			CODE 1NWX2		FACILITY		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD)  SEE SCHEDULE			11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED	
12. DISCOUNT TERMS Net 30 Days			13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Block 15								
14. SHIP TO SEE SCHEDULE			CODE		15. PAYMENT WILL BE MADE BY DFAS - COLUMBUS CENTER DFAS-CO/WEST ENTITLEMENT OPERATIONS P.O. BOX 182381 COLUMBUS, OH 43218-2381			CODE HQ0339		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2	
16. TYPE OF ORDER		DELIVERY/ CALL		X THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.							
PURCHASE		X		Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____. furnish the following on terms specified herein.							
ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.											
<div style="display: flex; justify-content: space-between;"> <div>NAME OF CONTRACTOR</div> <div>SIGNATURE</div> <div>TYPED NAME AND TITLE</div> <div>DATE SIGNED (YYYYMMDD)</div> </div> <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:         </div>											
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE  SEE SCHEDULE											
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE			20. QUANTITY ORDERED/ ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT	
		SEE SCHEDULE CONTRACT TYPE: Time-and-Materiels Firm-Fixed-Price KIND OF CONTRACT: Maintenance Contracts Service Contracts									
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.				24. UNITED STATES OF AMERICA TOD V. MILLER /SIGNED/ MILLERT@TACOM.ARMY.MIL (586)574-6802 BY: _____ CONTRACTING/ORDERING OFFICER					25. TOTAL \$40,668.16		
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED											
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE				
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE					28. SHIP. NO.  <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		29. D.O. VOUCHER NO.		30. INITIALS		
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS			31. PAYMENT  <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR		
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.									34. CHECK NUMBER		
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER							35. BILL OF LADING NO.		
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.	

CONTINUATION SHEET	Reference No. of Document Being Continued		Page 2 of 5
	PIIN/SIIN	W56HZV-05-D-0174/0019 MOD/AMD	
Name of Offeror or Contractor: KALMAR RT CENTER LLC			

SUPPLEMENTAL INFORMATION

Contract: W56HZV-05-D-0174  
Amount of Delivery Order 0019: \$ 40,668.16  
Modification: N/A

1. This Delivery Order 0019 to Contract No. W56HZV-05-D-0174 is issued in accordance with Ordering Clause H-9 of the contract.
2. The purpose of this order is to procure 8 each, Distribution Box under CLIN 2001AA at a unit cost of \$4,626.04. Core cost is \$300.00 each. Military/A Packaging cost: \$157.48 each.
3. The above price is based on Kalmar's Catalog Price List under Attachment 10 of the contract.
4. The respective Level of Packaging is Military/A and the FOB Destination Point is identified in Section B of the contract.
5. All other terms and conditions of the Basic Contract remain unchanged and in full force and effect.

\*\*\* END OF NARRATIVE A 0001 \*\*\*



Name of Offeror or Contractor: KALMAR RT CENTER LLC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	SHIP TO: <u>FREIGHT ADDRESS</u> (SW3227) DEF DIST DEPOT RED RIVER RECEIVING BLDG 499 10TH STREET AND K AVENUE TEXARKANA TX 75507-5000  <u>CONTRACT/DELIVERY ORDER NUMBER</u> W56HZV-05-D-0174/0019				

Name of Offeror or Contractor: KALMAR RT CENTER LLC

CONTRACT ADMINISTRATION DATA

PRON/								JOB			
LINE	AMS CD/	OBLG						ORDER	ACCOUNTING	OBLIGATED	
ITEM	MIPR	ACRN	STAT	ACCOUNTING CLASSIFICATION			NUMBER	STATION	AMOUNT		
2001AA	EH74E328EH	AA	1	97	X4930AC9D	6D	26KB S20113	W56HZV	\$	40,668.16	
	060011										
									TOTAL	\$	40,668.16
SERVICE								ACCOUNTING	OBLIGATED		
NAME	TOTAL BY ACRN		ACCOUNTING CLASSIFICATION					STATION	AMOUNT		
Army	AA		97	X4930AC9D	6D	26KB S20113	W56HZV	\$	40,668.16		
									TOTAL	\$	40,668.16
ACRN	EDI ACCOUNTING CLASSIFICATION										
AA	97	0X0X4930AC9D	S20113	76D00000600110000026KB			S20113				